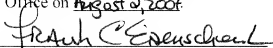


I hereby certify that this correspondence is being electronically filed in the United States Patent and Trademark Office on August 2, 2007.



Frank C. Eisenschek, Ph.D., Patent Attorney

Patent Application
Docket No. GIR-100XT
Serial No. 09/639,859

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Chih Min Kam
Art Unit : 1653
Applicant : Leonard S. Girsh
Serial No. : 09/639,859
Filed : August 16, 2000
For : Therapeutic Compositions for Treatment of a Damaged Tissue

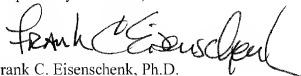
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

COMMUNICATION

Sir:

Attached hereto please find a Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address executed by the inventor for the above-referenced patent application. The Customer Number on the Revocation is 23557.

Respectfully submitted,



Frank C. Eisenschek, Ph.D.
Patent Attorney
Registration No. 45,332
Phone No.: 352-375-8100
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Gainesville, FL 32614-2950

FCE/gyl

Attachment: Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/639,859
Filing Date	August 16, 2000
First Named Inventor	Leonard S. Girsh
Art Unit	1653
Examiner Name	Chih Min Kam
Attorney Docket Number	GIR-100XT

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 23557

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

23557

OR

☐ Firm or
Individual Name

Address

City

Country

Telephone

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

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Email

L. GIRSH @ IMMUNOPATH

SIGNATURE of Applicant or Assignee of Record

Signature

Name

LEONARD S. GIRSH

Date

July-09-07

Telephone

239-392-6605

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.